

INSURANCE

INS. CASE OWNER:

Lynn

CC 3/EQ1800

2104, K2WB3

LKK:

IDAC:

Surveyor:

Edwin

DOI:

ASSIGNMENT

12/1/18

Date / Time:

12/2/18

Registered in Merimen:

12/2/18

Pre-assign / CCU / FTE



Insured Vehicle No.

GBG 6034C

Name of Insured

KOMM 500R FISHBAY PLU

Insured Tel No.

HP:

Excess Sec II :SS

D.O.A:

10/2/18

Is driver the owner?

(YES / NO)

Nature of Accident:

If NO, Driver Name / Age:

TEO KHAM BONG

Driver Tel No.:

(V/L: YES / NO)

Claim No.:

Policy No.:

Make / Model:

TOYOTA

Place of Accident:

AH HOOD RD

OI GIA REPORT: YES / NO

TP GIA REPORT: YES / NO

Insured Liability:

%

Final ? Yes / No

SHA 78P



INSRS:

WSP:

Tel:

Liability:

RMKS:

one by



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:



INSRS:

WSP:

Tel:

Liability:

RMKS:

Date / Time

21/2/18
victor

SHARP-X GBG 6034C-F
"kindly assist in retrieving video footage from taxi driver."
- pls verify DOA Ltr: 10/2/18, or: 01/02/18

Receive TP video.
DOA: 10/2/18

12/3/18

Confirm accident details, inform TP claim agree to settle and agree NCD will be affected. Letter send out

13/3/18

Email from EQ to settle at best.

RECEIVED 22 MAR 2018

STAGE DATE / PIC

Non-Reporting ltr (1st):

Non-Reporting ltr (2nd):

Non-Reporting ltr (Final):

Notification ltr (if non-pickup):

Call OI:

After call ltr to OI: 12/3/18

Documentation Check List: Handler Typist

Notification ltr (if non-pickup)

After call ltr to OI:

Authorisation To Act:

Release Voucher:

Final Repair Bill:

Car Rental Invoice:

Towing Invoice

LTA / GIA:

Medical Bill:

PIR:

Mandate/Reject Instruction:

LOD

Payment Breakdown Form:

Post-Repair Photos:

Others:

PRELIMINARY ADVICE

Date/Time: 12/2/18

Sent By: tm

FINALIZATION

Date/Time:

Confirm with:

Confirm by:

Repair Cost:

SS

(

days) Reduction:

%

Email

Call

FINAL SETTLEMENT

Date/Time: 22/3/18

Confirm with: JIM

Email

Call

Final Liability:

%

100

(Agreed / Assessed) BOLA S/N No. 1011

If NO or B 28, Ass. Lia:

Repair Cost:

+687

SS

1522.57

Loss of Rental (LOR):

SS

424.48

(

35 days) X 121.28

Loss of Use (LOU):

SS

175.00

(550

x 3.5 days)

Loss of Income (LOI):

SS

(5

x

days)

LOR only

☐

LOU only

☐

LOR + LOU

☐

LOR + LOI

☐

[Tick only one]

GIA/LTA Search

SS

7.49

Medical:

SS

Disbursement:

SS

(e.g. Tow/ Independent)

Legal Cost:

SS

1) Claim status: Normal/Reject/Private Settle

2) Report Format:

3) Survey fee:

Total:

SS

3129.34

Global Sum SS: 3120.00

FINAL PAYMENT

Date/Time:

Confirm with:

Email

Call

Payee 1:

SS

3120.00

Name 1:

Comforidelgro Engineering Pte Ltd.

Payee 2 (Strike if N.A.):

SS

Name 2:

Payee 3 (Strike if N.A.):

SS

Name 3:

COPY SENT
12/2/18

ASSIGNMENT

SHA218P

15 Dec 2017

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: _____

at Workshop m/s: _____

of: _____

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____

Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

NS	OS

Est. or Market Value: _____

IDAC Accident Report: _____

Consistent? Yes or No

GIA PR Seen: _____

Consistent? Yes or No

Est. Repairs: _____

2

days

Res: _____

Yes or No

Lump Sum: _____

2182

3

Val

Yes or No

CA / REV / REP / 24 HRS

Date: _____

Person Contacted: _____

Vehicle IN / OUT

Car No: _____

Type: M Car / M Cycle / Bus / Van / Lorry / Td / Prime Mover

Truck / Trailer: _____

Make: _____

Hyundai 240

1685

Colour: _____

Yellow

Insured: Std / Nil / NA

Sp Reading: _____

34016

Insured: Std / Nil / NA

Engine: _____

C No: _____

1CAHCB4144H4098875

Gen Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt

Brake: In order / Jammed / Leaked / Burnt

Mod: Nil / S/Rim / STD / Rim

Tyre Size: _____

F

205/60R16

R

BS / DUN / EXNOVA / GY / FS / LZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO

Habitat

Front: _____

Rear: _____

R Bal: _____

7

R Bal: _____

7

L Bal: _____

7

L Bal: _____

7

D.O.A: _____

10/2/18

D.O.A: _____

12/2/18

Survey held at: _____

104E (1st)

Des. of Damages: Frt / Rear / O/S / N/S / UIC / Rooftop

Rear N/S

The UIC / Chassis frame / Body Structure affected due to collision

Date: _____

Action: _____

14/2/18

Cost 814 \$1422.96/2017

EQ

P4

(Red- \$102.56
7.1.)

Link Time File Pass: _____

☐

Prel. Report

Days Of Repair: _____

☐

Final Report

Resurvey No. of Trip: _____

Link Time File Return: _____

Add Fee: _____

☐

Site Insp

\$

☐

Photo

\$

☐

Video

\$

☐

Other

\$

Report Format: _____

Lump Sum / t.B: _____



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

EQ INSURANCE COMPANY LTD

Ref : CC3/EQI18002904/K1wb3

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 13-02-2018



Code : EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBG 6034C	Veh. Inspected	SHA 218P
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	13/02/2018

2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--	--

5. General Information

Accident Date	10/02/2018	Inspection Date	12/02/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

number of COMFORTDELGRO

Date/Time: 12.02.2018 09:36 Page : 1

am: ARC Repair TP(CFSO)1 JOB CARD Sales Order: 3803707 JC NO.305115716

MER CITYCAB PTE LTD 7010070 MER NO 383 SIN MING DRIVE Singapore SINGAPORE 575717 65551188 (R) (P)	REGN NO SHA 218P	MILEAGE
	MAKE HYUNDAI	FUEL E.....1/2.....F
	MODEL I-40	DATE/TIME IN 10.02.2018 11:10
	YR OF MANU 15.12.2017	TARGET DATE
	CHASSIS CODE KMHLB41UMHU098835	COMPLETION DATE/TIME:

UNT CARD NO.

JOB DESCRIPTION

cident Date: 10.02.2018
TURE: 3P 10.02.18/B

NO	LABOR CODE	DESCRIPTION
----	------------	-------------

KED & PASSED OUT BY:

SERVICE ADVISOR	CUSTOMER'S SIGNATURE
-----------------	----------------------

edgement Slip	Exit Pass
io: SHA 218P JU BQ	Vehicle No.: SHA 218P
Service Advisor	Signature/Date
Name of Service Advisor	Date
turned to Service Reception upon collection	To be kept by Security Guard



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: To Be Advised
Our ref: CC3/EQ118002904/K1wb3

Date: 13.02.2018

The Motor Claims Department
M/s EQ INSURANCE COMPANY LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SHA218P

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 12.02.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	1,525.52
Revised Estimate Amount	: S\$	1,225.52
"Check" Items Amount	: S\$	-
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the
Rear N/S portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

Our Job Ref No : 305115716
Date : 13/02/2018

FINALIZATION FORM

To : LKK
Attn : KALVIN

Fax :

Vehicle Reg No. : SHA 218P Date of Accident : 10/02/18


The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: EQ --- GBG6034C
###
2. The finalized amount shall be:

(a) Spare Parts after List discount		\$1,002.96
(b) Labour Charges	###	\$420.00
Total for Part-By-Part Repair Cost		\$1,422.96
(c) Lumpsum Repair (if applicable)		
Total for Lumpsum repair cost after Less: 20%		
Final Lumpsum Repair cost		

3. Estimated normal period for repairs: 2 working days
4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days
5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : JUMANI
Tel : 6214 8315
Fax : 65468156

Signature : 
Name : KALVIN
Date : 14/2/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

CHECK ITEMS:

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 13.02.2018
Time: 10:10:53
Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305115716
REGN NO : SHA 218P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 15.12.2017
DATE/TIME IN : 10.02.2018 11:10
ACCIDENT DATE : 10.02.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0579-G	I40VC COVER ASSY-RR BUMPE	1	603.60	20.00	482.88
0002 04-01-0103-0581-A	I40VC LAMP ASSY-RR COMB O	1	565.60	20.00	452.48
0003 04-01-0101-0111-G	HYUNDAI BUMPER COVER CLIP	10	22.00	20.00	17.60
0004 04-01-0103-1150-A	I40VC PROTECTOR MAT	1 N	50.00	2.00-	50.00

SUB-TOTAL : 1,002.96

JOB NATURE

0000 L	PANEL BEATING- REAR	200.00
0001 23-502	SPRAYPAINT ON AFFECTED AREA	180.00
0002 17-01	CHECK ALL LIGHTING	20.00
0003 L	REMOVE/REFIX REVERSE SENSOR	20.00

SUB-TOTAL : 420.00

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE

Date: 13.02.2018

Time: 10:10:53

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010070
ADDRESS : CITYCAB PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65551188

JOB NO : 305115716
REGN NO : SHA 218P
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 15.12.2017
DATE/TIME IN : 10.02.2018 11:10
ACCIDENT DATE : 10.02.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,422.96

MVA NAME & SIGNATURE

DATE :

AUTHORISED : YES / NO

SURVEYOR NAME & SIGNATURE

DATE :

CITY CAB PTE LTD
REPAIR ESTIMATE*

EQ/LKK

Sei.

VEHICLE NO : SHA 218P

DATE 12/2/2018 8:36

MAKE :

240 Left Rear

MODEL : HYUNDAI SONATA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper — <i>Paint</i>			\$ 528.40 623.60
	Rear Bumper Clip — <i>me</i>			\$ 22.00
	Tail Lamp (LH) — <i>me</i>			\$ 244.00 565.60
	SUB TOTAL			\$ 944.40
	LESS 20%			\$ 188.88
	DISCOUNTED TOTAL			\$ 755.52
	 Rear Bumper Rubber Mat — <i>me</i>			\$ 50.00
				\$ 50.00
	Labour Charge			200
	Panel Beating			\$ 350.00
	Spray Painting Charge			\$ 200.00 180
	Wiring Charge			\$ 50.00 20
	Remove/Refix Reverse Sensor			\$ 120.00 20
	TOTAL LABOUR			\$ 720.00
	ESTIMATE TOTAL			\$ 1,525.52
<p><i>Kahin LKK</i> <i>12/2/18 1125</i> <i>2 Py.</i> <i>P/P</i> <i>Before Part pht</i></p>				

LKK Auto Consultants hence notify the Repairer of the following:

- To survey before/after spray painting
- To display damaged part(s) during survey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No legal proceedings is allowed
- Supplementary work(s) must be surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
Signature:
Date:

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

EQ/LKK

Jer.

DATE 12/2/2018 8:36

MAKE :

Left Bank

MODEL : HYUNDAI SONATA

LKK Auto Consultants hereby notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged parts during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modifications is allowed
- Supplementary claims must be resurveyed and is subject to LKK approval from insurance company

Accepted by: _____, Repairer.

Signed by: _____

Dated: _____

Shu Pei (LKKAUTO)

From: Bazlin Ahmad <bazlin.ahmad@eqinsurance.com.sg>
Sent: Wednesday, 21 February 2018 1:26 PM
To: Shu Pei (LKKAUTO)
Cc: Admin A; Vivian Lau (LKKAUTO); Joy Irene (LKKAUTO)
Subject: RE: Direct Settlement - Accident Involving GBG6034C (OI : EQI - TBA) AND SHA218P (TP : LKK REF -CC3/EQI18002904/K1wb3) on 10.02.2018
Attachments: GBG6034C 04.02.2018.pdf

Dear Shu Pei

Please refer attached.

Thank You.

Regards,
Lynn Ahmad
Executive | Claims



EQ Insurance Company Limited

10 Collyer Quay, #17-00, Tower Block, MND Complex, Singapore 049310
did: 6223 4190 | tel: 6223 9433 ext 888 | fax: 6223 4190
www.eqinsurance.com.sg



Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the sender immediately and delete all copies of it.

From: Shu Pei (LKKAUTO) [mailto:shupeil@lkkauto.com]
Sent: Wednesday, February 21, 2018 11:32 AM
To: Bazlin Ahmad
Cc: Admin A; Vivian Lau (LKKAUTO); Joy Irene (LKKAUTO)
Subject: RE: Direct Settlement - Accident Involving GBG6034C (OI : EQI - TBA) AND SHA218P (TP : LKK REF - CC3/EQI18002904/K1wb3) on 10.02.2018

Hi Lynn,

No attachment found. Kindly re-send.

Thank you

Best Regards,
Shu Pei | Admin
LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeil@lkkauto.com | fax: 6741-4108
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Bazlin Ahmad [<mailto:bazlin.ahmad@eqinsurance.com.sg>]
Sent: Wednesday, 21 February 2018 11:13 AM
To: Shu Pei (LKKAuto) <shupeil@lkkauto.com>
Cc: Admin A <admin-a@lkkauto.com>; Vivian Lau (LKKAuto) <vivianlau@lkkauto.com>; Joy Irene (LKKAuto) <joyirene@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving GBG6034C (OI : EQI - TBA) AND SHA218P (TP : LKK REF - CC3/EQI18002904/K1wb3) on 10.02.2018

Dear Shu Pei

We refer to the above matter, please find attached our insured GIA report.
Kindly assist in retrieving video footage from the taxi driver.

Thank You.

Regards,
Lynn Ahmad
Executive | Claims



EQ Insurance Company Limited
1 Maxwell Road #17-00 Tower Block SIND Complex Singapore 068110
did 65 6466 3881 | tel 65 6223 9433 ext 881 | fax 65 6323 4190
www.eqinsurance.com.sg



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From: Bazlin Ahmad
Sent: Wednesday, February 14, 2018 10:04 AM
To: 'Shu Pei (LKKAuto)'
Cc: Admin A; Vivian Lau (LKKAuto); Joy Irene (LKKAuto)
Subject: RE: Direct Settlement - Accident Involving GBG6034C (OI : EQI - TBA) AND SHA218P (TP : LKK REF - CC3/EQI18002904/K1wb3) on 10.02.2018

Dear Shu Pei

We refer to the above claim, our insured has yet lodge GIA report.

Thank You.

Regards,
Lynn Ahmad
Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block KMS Complex Singapore 069110

did 65 4496 9881 | tel 65 6221 9423 ext 881 | fax 65 6221 4190

www.eqinsurance.com.sg



A Member of Citistate



Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the sender immediately and delete all copies of it.

From: Shu Pei (LKKAUTO) [<mailto:shupeij@lkkauto.com>]

Sent: Tuesday, February 13, 2018 6:09 PM

To: Bazlin Ahmad

Cc: Admin A; Vivian Lau (LKKAUTO); Joy Irene (LKKAUTO)

Subject: Direct Settlement - Accident Involving GBG6034C (OI : EQI - TBA) AND SHA218P (TP : LKK REF - CC3/EQI18002904/K1wb3) on 10.02.2018

WITHOUT PREJUDICE

Dear Lynn,

We refer to the above matter.

This is a TP direct settlement case. We had inspected TP vehicle SHA 218P at M/s ComfortDelGro Engineering Pte Ltd - Loyang.

Enclosed for your perusal is:

- TP's GIA report
- Estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Vivian and she can be contacted at DID: 6841 8625.

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupeij@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : _____ Vehicle Registration No : 6BG 6034 C
Name(as shown in NRIC): Teo Cheng Beng
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : _____
Address : _____
Contact (Tel) : _____ (H/P) : _____
(Email) : _____
Date of Accident : 10 Feb 2018 Time of Accident : _____
Place of Accident : _____
Insurance Company : EQ Insurance Company Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Date of Accident should be 10 Feb 2018

Signature of Vehicle Owner / Driver

Date:

22/3/18 Fax: 6741 4108

COMFORTDELGRO ENGINEERING

Our Ref : CC18020339/ SHA 218P /JW(st)
Your Ref : _____
Date : 21-Feb-18

CDGE Taxi Claims Dept

59 Loyang Drive 4th Floor
Singapore 508969
ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 6280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506048W

Workshops

Braddell
205 Braddell Road
Singapore 579701

Loyang
59 Loyang Drive
Singapore 508969

Sin Ming
383 Sin Ming Drive
Singapore 575717

Pandan
45 Pandan Road
Singapore 609286

Ubi
320 Ubi Road 3
Singapore 408649

Senoko
24 Senoko Loop
Singapore 758156

Sungei Kadut
7 Sungei Kadut Way
Singapore 728791

Yishun
501 Yishun Industrial Park A
Singapore 768732

EQ Insurance Company Limited
5 Maxwell Road, MND Complex
#17-00 Tower Block
Singapore 069110

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SHA 218P YOUR INSURED GBG6034C
AND OTHER _____ ON 10.02.18

We are the authorised repair workshop for Citycab Pte Ltd, the owner of motor Vehicle No : SHA 218P which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving : GBG6034C we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 1,522.57
2	4 days Loss of Rental @ \$ 121.28 per day	\$ 485.12
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA / GIA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 2,015.18

HIRER'S CLAIM

7	4 days Loss of Income @ \$ 80.00 per days	\$ 320.00
Total Claims :		\$ 2,335.18

We enclosed herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs : 6 pcs.
b) LTA search slip/s of : GBG6034C
c) GIA / Police report/s of : SHA 218P
d) Letter of authority from owner / hirer / operator
() Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
(X) Photograph/s of Accident Scen (X) Downtime/Mileage record (X) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

Jim Wong

Deputy Manager

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

This is a computer generated letter. No signature is required.

A member of

COMFORTDELGRO





Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Our Ref: CC3/EQ118002904/K1wb3

13 March 2018

Hong Soon Fishery Pte Ltd
1 COLEMAN STREET
#03-10 THE ADELPHI
SINGAPORE 179803

Dear Sir/Madam,

ACCIDENT INVOLVING GBG 6034C AND SHA 218P ON 10/02/2018

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD) (if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

Vivian Lau
Case Handler
DID: 6841 8625
FAX: 6741 4108
EMAIL: Vivianlau@lkkauto.com

c.c. *EQ INSURANCE COMPANY LIMITED*
(Motor Claims Dept)

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGi 40 SHA218P , GBG6034C
AH HOOD RD TWDS BALESTIER RD

ON 10-Feb-18 10:05

I / We

TAY THIAM HEE

(Hirer) NRIC No.: S6809023G

and/or

(Relief) NRIC No.:

Taxi Number

SHA218P

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "ComfortDelGro Engineering Pte Ltd".

Date

10-Feb-2018

Name of Hirer

TAY THIAM HEE

Hirer NRIC

S6809023G

Signature :



Address

212 PASIR RIS STREET 21 #08-222
510212

Contact No.

96998222

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Repeat printout Page: 1

8010325

EQ INSURANCE COMPANY LIMITED

#17-00 5 MAXWELL ROAD TOWER BLOCK
SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO
SHA 218PINV. NO/DATE
91357477 15.02.2018MAKE
HYUNDAIJOB NO.
305115716MODEL
I-40

ODOMETER READING

DATE OF REG
15.12.2017DATE/TIME IN
10.02.2018 11:10CHASSIS CODE
KMHLB41UMHU098835

Description : 3P 10.02.18/B

S/No	Part No.		Qty	Unit Price	%Disc	Net
PART REQUISITION						
0001	04-01-0103-0579	140VC COVER ASSY-RR BUMPER	1	603.60	20.00	482.88
0002	04-01-0103-1150	140VC PROTECTOR MAT	1	50.00	0.00	50.00
0003	04-01-0103-0581	140VC LAMP ASSY-RR COMB O	1	565.60	20.00	452.48
0004	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP	10	2.20	20.00	17.60
SUB-TOTAL:			:			1,002.96

JOB NATURE

0001	I.	PANEL BEATING- REAR	200.00	200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	180.00	180.00
0003	17-01	CHECK ALL LIGHTING	20.00	20.00
0004	I.	REMOVE/REFIX REVERSE SENSOR	20.00	20.00

ComfortDelGro Engineering Pte Ltd
A member of COMFORTDELGROHead Office:
205 Braddell Road
Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010325	91357477	1,522.57	

GST REG. NO. M2-8921817-3

TAX INVOICE

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701
Hotline + 65 6387 6280 Facsimile + 65 6385 9755
Workshops:
50 Loyang Drive Singapore 508969 24 Serangoon Singapore 758134
353 Sln Meng Drive Singapore 570217 7 Sungei Kadut Way Singapore 729744
45 Pandan Road Singapore 609226 6 Defu Avenue 1 Singapore 539557
320 Ubi Road 3 Singapore 408546

(COMPANY REG. NO.: 199506048W
Page: 2

8010325
RQ INSURANCE COMPANY LIMITED
#17-00 5 MAXWELL ROAD TOWER BLOCK
SINGAPORE SG 069110
CONTACT NO: 62239433

VEHICLE NO
SHA 218P
MAKE
HYUNDAI
MODEL
i-40
DATE OF REG
15.12.2017
CHASSIS CODE
KMHLB41UMHU098835
INV. NO/DATE
91357477 15.02.2018
JOB NO.
305115716
ODOMETER READING
DATE/TIME IN
10.02.2018 11:10

S/No	Part No.	Qty	Unit Price	%Disc	Net
SUB-TOTAL :					420.00

Items total 1,422.96
Add GST @ 7.000 % 99.61
Invoice amount 1,522.57

Issued by : KATHERINETAN 15.02.2018 10:45:47
Repair type : CPSO/57/57
Payment Type/Term: /Credit 30 days

omfortDelGro Engineering Pte Ltd
member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010325	91357477	1,522.57	

Our Ref: CC18020339



Date: 14 February 2018

TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON	10/02/2018 @ 10:05 hrs
ALONG	AH HOOD RD TWDS BALESTIER RD
INVOLVING	GBG6034C

We refer to the above-mentioned accident and wish to inform that **CityCab Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SHA0218P** (the "Taxi"). The Taxi was hired to **TAY THIAM HEE IC NO S6809023G** a registered hirer-operator of **CityCab Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$121.28** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
GBG6034C	10 Feb 2018 / 10:05:00	Successful	E04	EQ INSURANCE COMPANY LTD

[Previous](#) [OK](#)



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

To : M/s EQ INSURANCE COMPANY LTD

Date: 23/03/2018

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	GBG 6034C (Insd Veh)	Your Ref. No. :
	SHA 218P (TP Veh)	Our Ref. No. : CC3/EQI18002904/K1wb3q2
Date of Accident	10/2/2018	

Liability	100%	
Final Repair Cost	: \$ 1,522.57	
Loss of Income	: \$ 175.00	3.5 days
Rental (If any)	: \$ 424.48	3.5 days
Others:	: \$ 7.49	
	: \$	
	2,129.54	
Final Settlement Sum	: \$ 2,120.00	GLOBAL SUM
Remarks	:	

Payment Instruction: Payee's Breakdown

1)	COMFORTDELGRO ENGINEERING PTE LTD	: \$ 2,120.00
		: \$

JOANNE LEE

LKK Auto Consultants Pte Ltd



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

EQ INSURANCE COMPANY LTD

Ref : CC3/EQ18002904/K1wb3q2

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 23-03-2018



Code : EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBG 6034C	Veh. Inspected	SHA 218P
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	12/02/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	KMHLB41UMHU098835	Colour	YELLOW
Odometer	34096	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR N/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	10/02/2018	Inspection Date	12/02/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.: 1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHA 218P

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	<u>REPLACEMENT OF PARTS</u>			
1	REAR BUMPER	DEFORMED	603.60	603.60
1	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	TAIL LAMP (LH)	CRACKED	565.60	565.60
	LESS 20% DISCOUNT		-238.24	-238.24
			952.96	952.96
	<u>SPECIAL NETT ITEMS</u>			
1	REAR BUMPER RUBBER MAT (SN)	NECESSARY	50.00	50.00
			50.00	50.00
	<u>LABOUR</u>			
	PANEL BEATING		350.00	200.00
	SPRAY PAINTING CHARGE		200.00	180.00
	WIRING CHARGE		50.00	20.00
	REMOVE/REFIX REVERSE SENSOR		120.00	20.00
			720.00	420.00
	GRAND TOTAL		1,722.96	1,422.96
RECOMMENDED COST OF REPAIRS				1,422.96

Report Ref No. CC3/EQ118002904/K1wb3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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